Image# 13964793794 PAGE 1 / 14

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Auti	norizea Committee	Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
HCA INC. GOOD GO	VERNMENT FUND			
ADDRESS (number and street)	PO BOX 550			
Check if different	ONE PARK PLAZA			
than previously reported. (ACC)	NASHVILLE		TN 37203 -	
2. FEC IDENTIFICATION N	UMBER ▼ CIT	Y 🛦	STATE ▲ ZIP CODE ▲	
C C00067231		S THIS NEW (N) OF	AMENDED (A)	
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M 20 (M3) Jun 20 (Mi	(Non-El Year Or Sep. 20 (M9) Dec. 2	nly) 20 (M12)
(a) Quarterly Reports:		20 (M4) Jul 20 (M7	, (Non-El Year O	lection nly) s1 (YE)
April 15 Quarterly Report (O1)			
July 15 Quarterly Report (Q2) (c) 12-Day PRE-Election Report for the:	Primary (12P) Convention (12C)	General (12G) Runof	f (12R)
October 15 Quarterly Report (Q3)	M M / D D	/ Y Y Y Y in the	
January 31 Year-End Report (YE) Electio		in the State of	
July 31 Mid-Year Report (Non-electi Year Only) (MY)	POST-Election Report for the:	General (30G)	Runoff (30R) Specia	al (30S)
Termination Repor (TER)	t Electio	n on	in the State of	
5. Covering Period 0	9 01 2013	through 09	30 / 2013	
I certify that I have examined t	his Report and to the best of	my knowledge and belief it is	true, correct and complete.	
Type or Print Name of Treasure	er David Anderson			
Signature of Treasurer Dav	rid Anderson	[Electronically Filed]	Date 10 / 15 / 2013	3
NOTE: Submission of false, error	neous, or incomplete information	n may subject the person signing	g this Report to the penalties of 2 U.S.C.	§437g.
Office Use			FEC FORM 33 Rev. 12/2004	X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

HCA INC. GOOD GOVERNMENT FUND

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
3.	(a) Cash on Hand January 1, 2013		281662.61
	(b) Cash on Hand at Beginning of Reporting Period	178889.50	
	(c) Total Receipts (from Line 19)	7324.48	34636.79
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	186213.98	316299.40
7.	Total Disbursements (from Line 31)	13192.39	143277.81
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	173021.59	173021.59
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

HCA INC. GOOD GOVERNMENT FUND

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:	10141 14110 1 01104	
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	5520.45	19801.80
(ii) Unitemized	1800.00	9764.30
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	7320.45	29566.10
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	7320.45	29566.10
Transfers From Affiliated/Other		
Party Committees	0.00	0.00
., ,		
All Loans Received	0.00	0.00
Lean Denouments Descived	0.00	0.00
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	0.00
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
to Federal Candidates and Other	0.00	5000.00
Political Committees	0.00	5000.00
Other Federal Receipts		
(Dividends, Interest, etc.)	4.03	70.69
Transfers from Non-Federal and Levin Funds		,
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
_		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b)) Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	7324.48	34636
_		
Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	7324.48	34636.79

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursem	ents	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Operating Expenditures: (a) Allocated Federal/Not Activity (from Schedu 	n-Federal ile H4)		
(i) Federal Share	· ·	0.00	0.00
(ii) Non-Federal Sha	are	0.00	0.00
(b) Other Federal Operat			
Expenditures		192.39	16677.81
(c) Total Operating Expe (add 21(a)(i), (a)(ii), a		192.39	16677.81
2. Transfers to Affiliated/Othe	1.11		
Committees		0.00	0.00
 Contributions to Federal Candidates/Comn and Other Political Comm 	nittees iittees	13000.00	127000.00
4. Independent Expenditures		0.00	0.00
(use Schedule E)	ditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)		0.00	0.00
6. Loan Repayments Made		0.00	0.00
7. Loans Made		0.00	0.00
 Refunds of Contributions (a) Individuals/Persons C 	Other		
` Than Political Commi	ittees	0.00	0.00
(b) Political Party Comm	ittees	0.00	0.00
(c) Other Political Comm		0.00	0.00
(such as PACs)		0.00	
(d) Total Contribution Re	funds	0.00	
(add Lines 28(a), (b),	, and (c))▶	0.00	0.00
9. Other Disbursements		0.00	-400.00
Federal Election Activity (3)	2 U.S.C. 8431(20))		
(a) Allocated Federal Ele	• , ,,		
(from Schedule H6)		0.00	0.00
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activ	vity Paid Entirely	2.22	0.00
With Federal Fur (c) Total Federal Election		0.00	0.00
Lines 30(a)(i), 30(a)(, ,	0.00	0.00
Total Disbursements (add	Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d),	29 and 30(c))	13192.39	143277.81
2. Total Federal Disburseme			
(subtract Line 21(a)(ii) and	d Line 30(a)(ii)	13192.39	143277.81

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	7320.45	29566.10		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7320.45	29566.10		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	192.39	16677.81		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	192.39	16677.81		

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE		6	OF		14
	(check only one)										
	>	1 1a		11b		11c		12			
		13		14		15		16			17

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) HCA INC. GOOD GOVERNM	IENT FUND					
Full Name (Last, First, Middle Initial) Janice Balzano		Date of Receipt				
Mailing Address 119 Oakfield Drive	Mailing Address 119 Oakfield Drive					
City Brandon	State Zip Code FL 33511	09 20 2013 Transaction ID : SA11AI.27946				
		Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	500.00				
Name of Employer	Occupation					
Brandon Regional Receipt For:	COO					
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00					
Full Name (Last, First, Middle Initial) 3. Justin Doss		Date of Receipt				
Mailing Address 12536 Natureview Circle		09 20 2013				
City Bradenton	State Zip Code FL 34212	Transaction ID : SA11AI.27954				
FEC ID number of contributing		Amount of Each Receipt this Period				
federal political committee.	C	45.45				
Name of Employer Blake Med Ctr	Occupation					
Receipt For:	COO Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	363.60					
Full Name (Last, First, Middle Initial) C. Bland Eng		Date of Receipt				
Mailing Address 119 Oakfield Drive		09 20 2013				
City Brandon	State Zip Code FL 33511	Transaction ID : SA11AI.27945				
FEC ID number of contributing federal political committee.	C 33311	Amount of Each Receipt this Period 1000.00				
Name of Employer	Occupation					
Brandon Regional	CEO					
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify) ▼	1000.00					
SUBTOTAL of Receipts This Page (optional)	•	1545.45				
TOTAL This Period (last page this line numb	er only)					

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE	PAGE		7 0	F	14				
(check only one)									
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13	14	4	15		16		17		

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) HCA INC. GOOD GOVERNIN	MENT FUND	
Full Name (Last, First, Middle Initial) Debbie Gafford Mailing Address 12804 W 132nd Street		Date of Receipt
City Overland Park	State Zip Code KS 66213	09 20 2013 Transaction ID : SA11AI.27921 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Menorah Medical Center	Occupation CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) Heath Hamilton Mailing Address 700 W 31st St #502		Date of Receipt
City Kansas City	State Zip Code MO 64108	09 20 2013 Transaction ID : SA11Al.27924 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Menorah Med Ctr Receipt For:	Occupation Dir Lab	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Richard Hamrick		Date of Receipt
Mailing Address 6 Acre Ave City	State Zip Code	09 20 2013
Richmond	VA 23775	Transaction ID : SA11AI.27952 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Capital Division Receipt For:	Occupation CMO Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	1050.00
TOTAL This Period (last page this line number	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE		8	OF		14
	(check only one)										
	×	11a	11	lb [11c		12			
		13	14	4		15		16			17

or for commercial purposes, other than using	g the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) HCA INC. GOOD GOVERNI	MENT FUND	
Full Name (Last, First, Middle Initial) Amy Hunt Mailing Address 5501 Noble Street		Date of Receipt
City Shawnee	State Zip Code KS 66218	09 20 2013 Transaction ID : SA11AI.27926 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Menorah Med Ctr	Occupation HRD	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Lenetra McCord Mailing Address 5721 W 119th St	·	Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Overland Park	State Zip Code KS 66209	Transaction ID : SA11AI.27934 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Menorah Med Ctr	Occupation COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Zach McMahon		Date of Receipt
Mailing Address 21481 W 121st St		09 20 2013
City Olathe	State Zip Code KS 66061	Transaction ID : SA11AI.27935 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Menorah Med Ctr	Occupation Dir Pharmacy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional	1)	550.00
TOTAL This Period (last page this line num	ber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	Ξ	9	OF		14
(check only one)										
X	11a		11b		11c		12	2		
	13		14		15		16	6		17

or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) HCA INC. GOOD GOVERNM	ENT FUND	
Full Name (Last, First, Middle Initial) James (RMCA) Miller Mailing Address 2810 Ambassador Caffery	Pkwy	Date of Receipt
City Lafayette	State Zip Code LA 70526	7 Transaction ID : SA11Al.27956 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Regional Med Ctr Acadiana	Occupation CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Mark Nichols Mailing Address 2400 Lee Highway		Date of Receipt
City Pulaski	State Zip Code VA 24301	Transaction ID : SA11AI.27955 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	125.00
Name of Employer LewisGale Hospital Pulaski Receipt For: Primary General Other (specify) ▼	Occupation CEO Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) David Park		Date of Receipt
Mailing Address 119 Oakfield Drive City Brandon	State Zip Code FL 33511	09 20 2013 Transaction ID : SA11AI.27948 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	200.00
Name of Employer Brandon Regional Receipt For: Primary General Other (specify)	Occupation VP Aggregate Year-to-Date ▼ 325.00	
SUBTOTAL of Receipts This Page (optional).	•	375.00
TOTAL This Period (last page this line numb	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	LINE I	NU	MBER	:	PAGE	1	10	OF	14
(check only one)									
X	11a		11b		11c		12		
	13		14		15		16		17

or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) HCA INC. GOOD GOVERNME	ENT FUND	
Full Name (Last, First, Middle Initial) Kelly Reno Mailing Address 9017 Martindale St		Date of Receipt
		09 20 2013
City Lenexa	State Zip Code KS 66220	Transaction ID : SA11AI.27938
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	500.00
Name of Employer	Occupation	
Menorah Med Ctr	CNO	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	800.00	
Full Name (Last, First, Middle Initial) 3. Mike Terrell		Date of Receipt
Mailing Address 119 Oakfield Drive		09 20 2013
City	State Zip Code	Transaction ID : SA11AI.27947
Brandon	FL 33511	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
Brandon Regional	CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. Steven Wilkinson		Date of Receipt
Mailing Address 5721 West 119th Street	ling Address 5721 West 119th Street	
City	State Zip Code	09 20 2013 Transaction ID : SA11AI.27944
Overland Park	KS 66209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Menorah Medical Center	President & CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2000.00	
SUBTOTAL of Receipts This Page (optional)		2000.00
TOTAL This Period (last page this line number	<u> </u>	5520.45

S 17

S	CHEDULE B (FEC Form 3X)		-a- · ···-	NUMBER: PAGE 11 OF 14			
`		Use separate schedule(s	FOR LINE NUMBER: PAGE 11 OF (check only one)				
П	EMIZED DISBURSEMENTS	for each category of the	21b	22 23 24 25 26			
		Detailed Summary Page	27	28a 28b 28c 29 30l			
_	and information and individual control Department of Control						
	ny information copied from such Reports and Staten for commercial purposes, other than using the nam						
Ļ	NAME OF COMMITTEE (In Full)	addition of any point		25			
$ \rangle$	HCA INC. GOOD GOVERNMENT	ELIND					
/	HCA INC. GOOD GOVERNMENT	FUND					
	Full Name (Last, First, Middle Initial)						
A.	Suntrust Bank	Date of Disbursement					
		M M / D D / Y Y Y Y					
	Mailing Address P.O. Box 622227			09 20 2013			
		State Zip Code		Transaction ID : SB21B.27895			
	Orlando	FL 32862-2227		114110404011 15 1 052 1 5121 000			
	Purpose of Disbursement account analysis fee			Amount of Each Dishurasment this Desired			
	Candidate Name			Amount of Each Disbursement this Period			
	Candidate Name		Category/	192.39			
	Office Sought: House Disbursen	nent For:	Туре	7			
		Primary General					
	President	Other (specify)					
	State: District:	- · · · · (- - 30·· · j /					
	Full Name (Last, First, Middle Initial)						
В.	. ,,,,	Date of Disbursement					
				M M / D D / Y Y Y Y			
	Mailing Address						
	City	State Zip Code					
	Purpose of Disbursement						
	ו מוףטפר טו בופטמופרוופוונ			Amount of Each Disbursement this Period			
	Candidate Name			oun of Last Blood of Horizontal Tollou			
			Category/ Type				
	Office Sought: House Disbursen	nent For:	1,760				
		Primary General					
		Other (specify) ▼					
_	State: District:						
	Full Name (Last, First, Middle Initial)						
C.				Date of Disbursement			
	Mailing Address						
	Oit.						
	City						
	Purpose of Disbursement						
	•	Amount of Each Disbursement this Period					
	Candidate Name			Amount of Each Disburschicht this I chou			
			Category/ Type				
	Office Sought: House Disbursen	nent For:	`				
		Primary General					
	President	Other (specify) ▼					
	State: District:						
				400.00			
8	SUBTOTAL of Disbursements This Page (optional)		·····	192.39			
ſ.	OTAL This Period (last nage this line number only)			192.39			
. 1	LIAI This Period (last nade this line number only)		▶	102.00			

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 12 OF 14		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)			
	Detailed Summary Page	21b	22 X 23	24 25 26		
	<u> </u>	27	28a 28b	28c 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)	and address of diffy politice	55	The state of the s	500 501111111100.		
HCA INC. GOOD GOVERNMENT	FUND					
/ 1707 HVO. GOOD GOVERNIVIEN	IOIND					
Full Name (Last, First, Middle Initial)						
A. BOEHNER FOR SPEAKER			Date of Disburseme	nt		
Mailing Address 200 FIDOT CT CF			M M / D D	7012		
Mailing Address 320 FIRST ST., SE			09 06 2013			
City	State Zip Code		*	Don 07000		
WASHINGTON	DC 20003		Transaction ID : S	B23.27898		
Purpose of Disbursement campaign						
Candidate Name			Amount of Each Dis	sbursement this Period		
JOHN A. BOEHNER		Category/		5000.00		
	ement For: 2014	Туре				
Senate	Primary General					
President	Other (specify) ▼					
State: OH District: 08						
Full Name (Last, First, Middle Initial)						
B. COMMON VALUES PAC			Date of Disburseme	nt		
Mailing Address			M M / D D	/		
Mailing Address 901 N WASHINGTON ST, SUITI	- 700		09 11	2013		
City	State Zip Code			ND00 07000		
ALEXANDRIA	VA 22314		Transaction ID : S	B23.2/903		
Purpose of Disbursement fund raiser						
			Amount of Each Dis	sbursement this Period		
Candidate Name		Category/		2000.00		
Office Sought: House Disburse	ement For:	Туре				
Senate Senate	Primary General					
President	Other (specify) ▼					
State: District:	· ·					
Full Name (Last, First, Middle Initial)						
C. CONNOLLY FOR CONGRESS			Date of Disburseme	nt		
Matter Address and Table			M = M / D = D	/		
Mailing Address 3706 PRADO PLACE			09 30	2013		
City	State Zip Code			Dec 2005		
FAIRFAX	VA 22031		Transaction ID : S	B23.27909		
Purpose of Disbursement						
campaign			Amount of Each Dis	bursement this Period		
Candidate Name GERALD EDWARD CONNOLLY		Category/		1000.00		
	ement For: 2014	Туре		7		
Senate	Primary General					
President	Other (specify)					
State: VA District: 11						
<u> </u>						
SUBTOTAL of Disbursements This Page (optional)				8000.00		
TOTAL This Period (last page this line number onl	<i>y</i>)					

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 13 OF 14				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)			
	Detailed Summary Page	21b	22 🗙 23 24 25 26			
		27	28a 28b 28c 29 30b			
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar						
	ne and address of any point	car committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) HCA INC. GOOD GOVERNMENT	ELIND					
HOA INC. GOOD GOVERNIVIENT	FUND					
Full Name (Last, First, Middle Initial)						
A. DIANA DEGETTE FOR CONGRES	SS INC.		Date of Disbursement			
Mallian Address B.O. B. 2007			M M / D D / Y Y Y Y Y			
Mailing Address P.O. Box 61337			09 13 2013			
City	State Zip Code					
Denver	CO 80206		Transaction ID : SB23.27908			
Purpose of Disbursement						
campaign fund raiser			Amount of Each Disbursement this Period			
Candidate Name DEGETTE, DIANA L		Category/	1000.00			
·	ment For: 2014	Туре				
Senate Season Senate	Primary General					
President	Other (specify) ▼					
State: CO District: 01						
Full Name (Last, First, Middle Initial)						
B. FRIENDS OF JOE HECK			Date of Disbursement			
Mailian Adduces DO DOVETOVA			M M / D D / Y Y Y Y Y			
Mailing Address PO BOX 750114			09 06 2013			
City	State Zip Code		Transaction ID - CD22 27004			
LAS VEGAS	NV 89136		Transaction ID : SB23.27901			
Purpose of Disbursement campaign			Amount of Fook Dichurance this Device			
Candidate Name			Amount of Each Disbursement this Period			
JOE HECK		Category/ Type	500.00			
	ment For: 2014	1,750				
Senate	Primary General					
President	Other (specify) ▼					
State: NV District: 03						
Full Name (Last, First, Middle Initial)		Data of Dishamanana				
C. Gregg Harper for Congress			Date of Disbursement			
Mailing Address 228 S Washington Street			09 11 2013			
Suite B-20						
City	State Zip Code		Transaction ID : SB23.27902			
Alexandria Purpose of Disbursement	VA 22314					
campaign fund raiser			Assessment of Foods Dichesses and this Books I			
Candidate Name		Catanamı	Amount of Each Disbursement this Period			
Gregg Harper		Category/ Type	1000.00			
	ment For: 2014					
Senate X	Primary General					
President	Other (specify) ▼					
State: MS District: 03						
CURTOTAL of Disharas and Till B			2500.00			
SUBTOTAL of Disbursements This Page (optional)		······	2555.55			
TOTAL This Period (last page this line number only)						

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 14 OF	14
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	21b 27	22 X 23 24 25 28c 29	26 30b
Any information copied from such Deports and Chate-	monte may not be sald or			
Any information copied from such Reports and State or for commercial purposes, other than using the nar	ne and address of any politic	ed by any perso al committee to	solicit contributions from such committee.	0
NAME OF COMMITTEE (In Full)				
$ \; angle$ HCA INC. GOOD GOVERNMENT	FUND			
Full Name (Look First Middle In 1971)		-		
Full Name (Last, First, Middle Initial) A. REED COMMITTEE			Date of Disbursement	
NEED CONNINTTEE			M M / D D / Y Y Y Y	
Mailing Address PO BOX 8628			09 16 2013	
City	State 7in Code			
City CRANSTON	State Zip Code RI 02920		Transaction ID: SB23.27905	
Purpose of Disbursement	32020			
fund raiser			Amount of Each Disbursement this Period	iod
Candidate Name		Category/	1000.00	
JACK F REED Office Sought: House Disburse	ment For: 2014	Туре		_
Senate Sought.	Primary General			
President	Other (specify) ▼			
State: RI District: 00				
Full Name (Last, First, Middle Initial)	-DVATION OF OASI	- 4 1 10 1 4	Data of Diahamana and	
B. THE COMMITTEE FOR THE PRESE	EKVATION OF CAPIT	ALISM	Date of Disbursement	
Mailing Address PO BOX 65314			09 06 2013	
	State Zip Code DC 20035		Transaction ID : SB23.27896	
WASHINGTON Purpose of Disbursement	DC 20035			
fund raiser			Amount of Each Disbursement this Period	iod
Candidate Name		Category/	1500.00	
Office Cought		Type	1500.00	
Office Sought: House Disburser Senate	ment For: Primary General			
President	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)				
C.			Date of Disbursement	
Mailing Address			M M / D D / Y Y Y Y	
Maining Address				
City	State Zip Code			
Purpose of Disbursement	T			
i dipose oi Dispuisement			Amount of Each Dichuragement this Devi	iod
Candidate Name		Category/	Amount of Each Disbursement this Period	iou
		Type		ال
	ment For:			
Senate President	Primary General Other (specify) ▼			
State: District:	Onici (Specify)			
2.55.75				
SUBTOTAL of Disbursements This Page (optional)			2500.00	
				Ħ
TOTAL This Period (last page this line number only))		13000.00	